



**Community Development Department**  
**Development Services Division**  
12453 Highway 92, Woodstock, GA 30188  
Office: (770) 592-6054 Fax: (678) 388-6368  
Office Hours: M - F 8 AM - 5 PM  
[businesslicense@woodstockga.gov](mailto:businesslicense@woodstockga.gov)

### **2017 Home Occupational Tax License Renewal Application**

Dear Business Owner,

Your Home Occupational Tax License **expires on December 31, 2016**. Please complete this form and the affidavit verifying status, and **return them to our office before January 1, 2017**. Late fees will begin to accrue starting February 1, 2017.

Every business will be required to complete the affidavit verifying status and provide a copy of government issued photo ID (i.e. driver's license, permanent resident card, etc). Feel free to contact us at the information above with any questions about these requirements. Renewal forms may be returned via hand delivery, mail, fax or email (information above). Our office staff is able to notarize affidavits for free for you if you choose to visit our office.

Company Name:

Contact Name:

Email Address:

Contact Phone Number:

Mailing Address:

Business Location:

**Have there been any changes in the information provided with last year's renewal?** Yes \_\_\_\_\_ No \_\_\_\_\_

Fees:	Minimum (\$30 Admin Fee + \$30 Business Owner)	\$ <u>60</u>
	Late Fee (Starting Feb. 1, add 1.5%/month; Starting April 1, add 10% + 1.5%/month)	\$ _____
	Total	\$ _____

*I certify that the information provided is true and correct to the best of my knowledge*

Print Name

Signature

Date

***Affidavit Verifying Status  
for a City Public Benefit Application***

By executing this affidavit under oath, as an applicant for the City of Woodstock, Georgia Business License or Occupation Tax Certificate, Alcohol License, Taxi Permit, or other public benefit as referenced in O.C.G.A. § 50-36-1, I am stating the following with respect to my application for the City of Woodstock, Georgia Business License or Occupational Tax Certificate, Alcohol License, Taxi Permit, or other public benefit for

\_\_\_\_\_  
[Name of natural person applying on behalf of individual, business, corporation, partnership, or other private entity]

1) \_\_\_\_\_ **I am a United States citizen**

**OR**

2) \_\_\_\_\_ **I am a legal permanent resident 18 years of age or older, or I am an otherwise qualified alien or non-immigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.\***

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A §16-10-20.

Signature of Applicant:

Date:

\_\_\_\_\_

\_\_\_\_\_

Print Name:

\_\_\_\_\_

SUBSCRIBED AND SWORN  
BEFORE ME ON THIS

\_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission Expires:

\*

\_\_\_\_\_  
Alien Registration number for non-citizens

\*Note: O.C.G.A. §50-36-1(e)(2) requires that aliens under the federal Immigration and Nationality Act, Title 8 U.S.C, as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien," legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:

\_\_\_\_\_